

**TRAINER TRANSFER AUTHORIZATION**



**WV Racing Commission**

900 Pennsylvania Ave.

Suite 533

Charleston WV 25302

Phone: 304.558.2150

Fax: 304.558.6319

Date \_\_\_\_\_

**TO: REGISTRATION CLERK / CERTIFICATE CLERK**

I, \_\_\_\_\_ do hereby authorize the transfer of the training of my horse(s).

**Horses**

**Owner**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

from Trainer \_\_\_\_\_

to Trainer \_\_\_\_\_

as of \_\_\_\_\_

*Date*

I, further state that no indebtedness exists between Trainer \_\_\_\_\_ and myself.

The above described horse(s) have/has been SOLD-TRANSFERRED.

By \_\_\_\_\_

To \_\_\_\_\_

*Owner*

By order of \_\_\_\_\_

*Steward*

Please notarize and fax back to:



P. O. Box 551 Charles Town WV 25414 Fax: 304.724.4854